UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington; D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1179151

OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2002 Estimated average burden hours per response . . 16.00

SEC USE ONLY									
Prefix	Serial								
DATER	ECEIVED								

1991 1919 11191 19191 BIBIL 18111 BBIBS ILBII SILBS ILIBA ILIBAS I
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				10-1-1		
Name of Offer Longboat Op	ing (☐ check if this portunity Partners, L.P.: O		and name has char d Partnership Inte		hange.)	
Filing Under (0	Check box(es) that apply):	☐ Rule 504	☐ Rule 505	☑ Rule 506	☐ Section 4(6)	□ ULOE
Type of Filing:	New Filing	□ A	mendment		ſ	2504
		A. BA	SIC IDENTIFICATIO	N DATA		PROCESSION
1. Ente	r the information requested abo	out the issuer				APR 3 0 2007
Name of Issue Longboat Op	r (□ check if this portunity Partners, L.P. (th		and name has chang	ged, and indicate ch	ange.)	THOMSON
	ecutive Offices (Numb Road, Pittsburgh, PA 1521		y, State, Zip Code)		ephone Number (Incl 2) 782-0200	uding Area Code)
	ncipal Business Operations (N m Executive Offices) Same as		City, State, Zip Cod	e) Tele	phone Number (Incl APR	uding Area (Code)
Brief Description The investment	on of Business ent objective of the Partner	ship is to inves	t, reinvest and trac	de in securities.	A SECONDARY OF THE PROPERTY OF	60 (000)
□ corpo	ess Organization pration ness trust		artnership, already fo artnership, to be forr		other (please speci	K):/
Actual or Estin	nated Date of Incorporation or	Organization:	Month Ye			
Jurisdiction of	Incorporation or Organization:		03 20 er U.S. Postal Servic r; FN for other foreign		☐ Estimated tate:	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, it received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

	A. BASIC IDENTI	FICATION DATA		
 Enter the information requested for the formation in Each promoter of the issuer, if the issuer, if the issuer, beneficial owner having the poor of the issuer; Each executive officer and director of Each general and managing partner 	suer has been organized with wer to vote or dispose, or dir of corporate issuers and of co	ect the vote or disposition of		•
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, if individual) Longboat Capital Management, LLC (the	"General Partner")			
Business or Residence Address (Number 139 Freeport Road, Pittsburgh, PA 1521	er and Street, City, State, Zip 5	Code)		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	□ Executive Officer	☑ Director	☐ General Partner of the General Partner
Full Name (Last name first, if individual) Weiner, Bruce B.				
Business or Residence Address (Number 139 Freeport Road, Pittsburgh, PA 1521)	er and Street, City, State, Zip 5	Code)		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Bernstein, Thomas E.				
Business or Residence Address (Number 139 Freeport Road, Pittsburgh, PA 1521	er and Street, City, State, Zip	Code)		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Markel, Jeffrey B.				•
Business or Residence Address (Number 139 Freeport Road, Pittsburgh, PA 1521	er and Street, City, State, Zip	Code)	,	
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Smith, Kyle P.				
Business or Residence Address (Number 139 Freeport Road, Pittsburgh, PA 1521	er and Street, City, State, Zip	Code)		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		-		
Business or Residence Address (Number	er and Street, City, State, Zip	Code)		

1			-	B. IN	FORMAT	ION ABO	UT OFFE	RING	=	<u> </u>		
1. H	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.											No
2. What is the minimum investment that will be accepted from any individual?											図 \$ <u>250,</u> (_
*(Subject to the waiver of the General Partner.) 3. Does the offering permit joint ownership of a single unit?											Yes	No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full N	ame (Last nai	ne first, if	individual)									
N/A	ess or Reside	noo Addro	oo (Numbe	r and Stra	ot City St	toto Zin C	odo)	_				
Dusine	ess of Reside	nce Addre	iss (Multiple	anu Sue	et, City, 3	iale, zip C	ou e)					
Name	of Associated	Broker o	r Dealer			·	···					
								<u>-</u>				
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
CAL 1	(Check "All				·	(OT)	(DE)	(DC)	(C) 1			l States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full N	ame (Last nai	ne first, if	individual)									
Busine	ess or Reside	nce Addre	ss (Numbe	er and Stre	eet, City, S	tate, Zip C	ode)					
Name	of Associated	Broker o	r Dealer									
States	in Which Pe	rson Listed	Has Solid	ited or Int	ends to So	licit Purch	asers					
	(Check "All	States" o	r check ind	ividual Sta	ates)							l States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full N	ame (Last nai	me first, if	individual)									
Dunin	ana ar Danida	Add	aa (Niumba	and Ctra	ot City C	tata Zin C	o do \					
Busine	ess or Reside	nce Adare	ss (Numbe	er and Stre	eet, City, Si	tate, Zip C	ode)					
Name	of Associated	d Broker o	r Dealer									
States	in Which Pe					licit Purch	asers					
	(Check "All				•							l States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ 0	\$0
	Equity:		
	• •	\$0	\$ <u> 0 </u>
	□ Common □ Preferred		
	Convertible Securities (including warrants):	\$ <u> </u>	\$ <u> 0 </u>
	Partnership Interests	\$ <u>1,000,000,000</u>	\$ <u>28,644,636</u>
	Other (Specify)	\$	\$ <u> </u>
	Total	\$ <u>1,000,000,000</u>	\$ <u>28,644,636</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	19	\$ <u>28,454,636</u>
	Non-accredited Investors	1	\$ <u>190,000</u>
	Total (for filings under Rule 504 only)	N/A	\$N/A
	Answer also in Appendix, Column 3, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	_N/A_	\$ 0
	Regulation A	N/A	\$ 0
	Rule 504		\$ 0
		N/A	<u> </u>
	Total	<u>N/A</u>	\$0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the		
	estimate.	ren	•
	Transfer Agent's Fees Printing and Engraving Costs	[X]	\$ <u>0</u>
	Legal Fees	⊠ ⊠	\$ <u>0</u> \$ <u>45,000*</u>
	Accounting Fees	X	\$ <u>45,000</u> \$ 0
	Engineering Fees	⊠	\$ 0
	Sales Commissions (specify finders' fees separately)	X	\$ 0
	Other Expenses (identify Blue Sky	(X)	\$ 5,000 *
	Total	×	\$ <u>50,000</u> \$ <u>50,000</u> *
			# <u>50,000</u>

^{* -} estimated amounts

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSE	S AND	USE O	F PROC	EDS		
4.	b. Enter the difference between the aggregate and total expenses furnished in response "adjusted gross proceeds to the issuer."	e to Part C - Question 4.a. This	differenc	e is the) :		\$ <u>999</u> ,	950,000
5.	Indicate below the amount of the adjusted gused for each of the purposes below. If the estimate and check the box to the left of the the adjustment gross proceeds to the issuer states.	e amount for any purpose is not krestimate. The total of the payments I	nown, fui isted mu	rnish ar st equa	ı			
				O: Dire	ments to fficers, ectors, & filiates			ments to Others
	Salaries and fees		X	\$	0	X	\$	0
	Purchase of real estate		X	\$	0	X	\$	0
	Purchase, rental or leasing and installation	of machinery and equipment	X	\$	0	X	\$	0
	Construction or leasing of plant buildings ar	nd facilities	×	\$	0	X	\$	0
	Acquisition of other businesses (including the this offering that may be used in exchange)	for the assets or securities of						
	another issuer pursuant to a merger)		X	\$	0	X	\$	0
	Repayment of indebtedness		X	\$	0	X	\$	0
	Working capital		X	\$	0	X	\$	0
	Other (specify): Investment Program/Securi	ties	X	\$	0	X	\$ <u>999</u>	9,950,000
	Column Totals		X	\$	0	X	\$ <u>999</u>	9,950,000
	Total Payments Listed (column totals added	d)	X		\$ <u>9</u>	99,950	0,000	
		D. FEDERAL SIGNATURE						
foll	e issuer has duly caused this notice to be signe owing signature constitutes an undertaking by uest of its staff, the information furnished by the	the issuer to furnish to the U.S. Se	curities	and Exc	change Co	mmis	sion, u	oon written
	uer (Print or Type) ngboat Opportunity Partners, L.P.	Signature MA LLL	Manag	Da H	ite _/_ <i>[o_</i> /02	<u> </u>		
	me (Print or Type) ffrey B. Markel	Title of Signer (Print or Type) Managing Member of the Ger				_		
		ATTENTION						
	Intentional misstatements or omissic	ATTENTION ons of fact constitute federal crim	inal vio	lations	(See 18	USO	1001	1

APPENDIX

1	2 3		T	5					
	Intend to non-a investor (Part B	I to sell ccredited s in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C – Item 2)			Disqualificat under State U (if yes, attac explanation waiver grant (Part E - Iten	
State	Yes	No	LP Interests	Number of Accredited Investors	Amount	Number of Non-accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
со									
СТ		-							
DE					7,				
DC				:					
FL		Х	1,000,000,000	5	\$8,462,440	0	0		X
GA									
HI		-							
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD							-		
MA									
MI									
MN									
MS									
МО									
				1	L	1		1	لـــــــــــــــــــــــــــــــــــــ

			IX

1		2	3		4				5
	to non-a	to sell accredited s in State i-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of invo amount purcha (Part C -	ased in State		unde Ul (if yes explar waiver (Part E	lification r State LOE , attach nation of granted) – Item 1)
State	Yes	No	LP Interests	Number of Accredited Investors	Amount	Number of Non- accredited Investors	Amount	Yes	No
MT		·			-				
NE									
NV		.,							
NH				<u> </u>			-		<u> </u>
NJ									
NM							_		
NY									<u> </u>
NC									
ND									
ОН									
ок									
OR									
PA		Х	1,000,000,000	18	\$19,992,196	1	\$190,000		Х
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA									
WA									_
WV									
WI									
WY							-		
PR							<u> </u>		

				C (\$8/3 A)	<					
		E. STATE SIGNATURE		1	14.9					
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification Yes N provisions of such rule?									
	See Appendix, Column 5, for state response.									
2.	. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.									
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	The undersigned issuer represents that the issuer uniform limited Offering Exemption (ULOE) of the availability of this exemption has the burden of	the state in which this notice is filed and und	erstands that the issu							
	e issuer has read this notification and knows the undersigned duly authorized person.	contents to be true and has duly caused this	s notice to be signed o	on its bel	nalf by					
	uer (Print or Type) ngboat Opportunity Partners, L.P.	Signature								
	ne (Print or Type) frey B. Markel	Title of Signer (Print or Type) Managing Member of the General Partne	er							

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.